Approved for use through 7/31/2008, OMB 0651-003 2
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	. Silver the Pa	PATENT APPLICATION FEE DETERMINATION RECORD  Substitute for Form PTO-875										flice; U.S. DEPARTMENT OF COMMERC E less it displays a valid OMB control numbe a Application or Docket Number			
	CLAIMS AS FILED - PART I									09/869887					
	(Column 1) (Column 2						SMALL ENTITY				OTHER THAN SMALL ENTITY				
	BASIC FEE (37 CFR 1.18(a))		NUMBER F	IBER FILED NUMBER EXTE			RATE FEE			]		RATE FEE			
•	TOTAL CLAIMS (37 CFR 1.16(c))		10	0			<b> </b>	-   3		OR		\$			
	INDEPENDENT CL (37 CFR 1.16(b))	AIMS	,	nus 20 =	<u>:</u>		× 5	_ =		OR	x s	=	-		
		DENT CLAIM PR		(37 CER + 46/4))			X \$	=  -		OR	× \$	=			
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))  * If the difference in column 1 is less than zero, enter "0" in column 2.							= -		OR	+ \$				
	CLAIMS AS AMENDED - PART II						TOTA	AL		OR	TOTAL				
	מאמאחו	(Column 1)		EU – PART	н										
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	FIRST PRESENT	ATION OF AUT TH					× 5	= .		OR >	< \$=		$\dashv$		
,	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ s	=		OR +	· \$ =		$\exists$		
	9/4/5 (Column 1) (Column 2) (Column 2)						ADD'L FEE	<u> </u>			OTAL DD'L FEE				
1	B	CLAIMS REMAINING	Ţ.	HIGHEST NUMBER	2) (Column 3 PRESENT	7 7	<del></del>	Т-		_					
-	Total	AFTER AMENDMENT		PREVIOUSL PAID FOR	Y EXTRA	11	RATE	ADD TION/	/L	-	RATE	ADDI- TIONAL			
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1	FIRST PRESENTATION	ON OF MULTIPLE	DEPENDE	NT CLAIM (37 C	CFR 1.16(d))	-	+ \$ <u> </u>		OF		-	\	1		
							OTAL DD'L FEE		OR	TO1	AL I'L FEE		1		
1		CLAIMS		(Column 2) HIGHEST	(Column 3)				· ,		<u>.</u>		1		
15/14	-1 1	EMAINING AFTER ENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL		R	ATE	ADDI-			
	Total (37 CFR 1.16(c))		Minus	TAIDTOR	-	-		FEE	-	-		TIONAL FEE			
AMENDME	Independent (37 CFR 1.16(b))		linus ''		=	X		<del></del> -	OR	× \$	== -				
_	FIRST PRESENTATION	OF MULTIPLE DE	PENDENT	CLAIM (37 CFR	t 1.16(d))	+ \$			OR	× \$	== -				
	* If the entry in column	l is less than the	entry in o	column 2, write	"O" in column 3	TO:	TAL D'L FEF		OR OR	+ s TOTAL ADD'L					
	If the "Highest Number The "Highest Number P	Description	9101 1111	MIS SPACE IS	less than 20, an	ler "20' r "3".	<b>.</b>								
ils co	ollection of information i	s required by 3	7 CFR 1	18 The inform	ı) is the highest	numbe	found in the	appropriat	e box in c	olumn 1.		- 1			

Ine Trignest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.